STATE OF CALIFORNIA
CALIFORNIA DEPARTMENT OF TECHNOLOGY
OFFICE OF TECHNOLOGY SERVICES

# CGEN VENDOR WEB PORTAL ACCESS FORM

OTECH 383 (REV. 05/2015)

**Coordinator:**

**Phone:**

**Email:**

**Department:**

**Mail Address:**

**City, State, Zip:**

| A/D (Add/Delete) | (Check any that apply) | | | First Name | Last Name | Title | Phone | Email | Mail Address (if different) | * Verizon Web Portal Username |
|---|---|---|---|---|---|---|---|---|---|---|
| | AT&T BusinessDirect Web Portal | * Verizon CALNET 2 Customer Center Web Portal Tools | Verizon Business WAN Analysis (eHealth) | | | | | | | |
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* User must create their Verizon Web Portal account prior to requesting Web Portal Tool access